

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF ALECIA RUMPH & CORDERO RUMPH	COURT CASE NUMBER 15CV8749
DEFENDANT THE CITY OF NEW YORK	TYPE OF PROCESS SUMMONS & COMPLAINT
SERVE <div style="display: flex; align-items: center;"> <div style="font-size: 4em; margin-right: 10px;">{</div> <div> NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN DETECTIVE WILLIAMS ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 4111 LACONIA AVENUE, BRONX N.Y. 10466 </div> </div>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: <div style="border: 1px solid black; padding: 5px; margin: 5px;"> ALECIA RUMPH & CORDERO RUMPH 4042 WILDER AVE, APT 1 BRONX, NEW YORK N.Y. 10466 </div>	
AT	Number of process to be served with this Form - 285 Number of parties to be served in this case Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

47TH PRECINCT
4111 LACONIA AVENUE, BRONX NEW YORK
N.Y. 10466
718-920-1211

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

Alecia Rumph & CR**646-645-8291****12-14-2015**

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process P-4	District of Origin No. 054	District to Serve No. 054	Signature of Authorized USMS Deputy or Clerk	Date 1/11/2016
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service
2/22/2016
Time
11:35 (am)

Signature of U.S. Marshal or Deputy

4390

Service Fee \$73.00	Total Mileage Charges (including endeavors) \$215.47	Forwarding Fee	Total Charges \$288.47	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

2/11/2016 Set up for mail service -
2/19/2016 Set up for personal service

PRIOR EDITIONS
MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/80)
(Instructions Rev. 12/08)

15-8749-2